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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Crouthamel et al.)	Examiner:	Zurita, James H.
Serial No.:	09/640,437)	Art Unit:	3625
Filed:	August 17, 2000)	Attmy Doc.:	21221.01US1
Title:	Method And System For Exchanging Data Between Affiliated Sites)		

RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated July 31, 2003, please enter the following amendments and consider the following remarks.

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments being on page 7 of this paper.

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02 FC:1201 168.00 DA

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By: Gladys Negrón-Munoz
Name: Gladys Negrón-Munoz

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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	09/640,437	
	Filing Date	08/17/2000	
	First Named Inventor	James Crouthamel	
	Art Unit	3625	
	Examiner Name	Zurita, James H.	
Total Number of Pages in This Submission	11	Attorney Docket Number	21221.01US1

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">- return postcard</div>
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Firm or Individual name	Gary R. Jarosik Reg. No. 35,906 Customer No. 34018
Signature	
Date	September 5, 2003

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Typed or printed name	Gladys Negron-Munoz		
Signature		Date	September 5, 2003

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